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|-----------------------------|---------------------------------------|--------------|------------------------|-------------------------------------|

## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *BJ* \*\*\*\*\*

This appln claims benefit of 60/433,848 12/16/2002

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 03/24/2004

|  |                                |                        |                       |                            |
|--|--------------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no  | STATE OR<br>COUNTRY<br>IL      | SHEETS<br>DRAWING<br>3 | TOTAL<br>CLAIMS<br>42 | INDEPENDENT<br>CLAIMS<br>4 |
| 35 USC 119 (a-d) conditions<br>met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>Allowance |                                |                        |                       |                            |
| Verified and<br>Acknowledged   | Examiner's Signature <i>BJ</i> | Initials               |                       |                            |

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## TITLE

Method and apparatus for mixed mode personal communication

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|------------|----------|---|--|
| FILING FEE | RECEIVED | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees  |
|            |          |   | <input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of<br>time ) |